## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09732260

CLAIMS AS FILED - PART I							S	SMALL ENTITY			OTHER	THAN
			(Column 1)					TYPE		OR	SMALL	
TOTAL CLAIMS			20				Γ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			80 minus 20=		. 60		Ī	X\$ 9=		OR	X\$18=	1080=
INDEPENDENT CLAIMS			2 minus 3 =		0		Ī	X40=		OR	X80=	1
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT	· · ·	- · · · · · · · · · · · · · · · · · · ·		Ī	+135=		OR	+270=	1
* If	the difference	in column 1 is	less than ze	ero, entei	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	17980
	C	LAIMS AS A	MENDE	MENDED - PART II						•	OTHER	THAN
_	(機能がため、40mm)という (M. M. かしみょう 1.5 -	(Column 1)		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	l	X\$ 9=		OR	X\$18=	
	Independent	<u> </u>		CLAIM			X40=	٠.	OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	:	OR	+270=	
ţ								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		•			•							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIC PAID.	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
								+135= TOTAL		OR	+270=	
	· 									OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	T	X40=	··	00	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135= TOTAL		OR	+270=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE	
7	i t⊓e "Highest Nui The "Highest Num	mber Previously Pa ber Previously Paid	aid For" (N THI: d For" (Total or	SPACE is Independe	s less that ent) is the	า 3, enter "3." highest number		DIT. FEE L	ropriate box		* '	